

RAINBOW HOUSE

3100 SOUTHBROOK COURT

MANITOWOC 54220

Phone: (920) 684-4851

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 15

Total Licensed Bed Capacity (12/31/03): 15

Number of Residents on 12/31/03: 15

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Individual

FDDs

No

No

Yes

15

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		0.0
Supp. Home Care-Personal Care	No					1 - 4 Years		26.7
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	86.7	More Than 4 Years		73.3
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	6.7			----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	6.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	0.0	65 & Over	13.3	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		15.1
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		1.8
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	46.7	Aides, & Orderlies		
Mentally Ill	No		----	Female	53.3			
Provide Day Programming for			100.0		----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	15	100.0	154	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	15	100.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		15	100.0		0	0.0		0	0.0		0	0.0		0	0.0	15	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	6.7	66.7	26.7	15
Other Nursing Homes	0.0	Dressing	26.7	66.7	6.7	15
Acute Care Hospitals	0.0	Transferring	86.7	6.7	6.7	15
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	53.3	26.7	20.0	15
Rehabilitation Hospitals	0.0	Eating	26.7	66.7	6.7	15
Other Locations	0.0	*****				
Total Number of Admissions	0	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care	0.0	
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	46.7	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning	0.0	
Other Nursing Homes	0.0			Receiving Ostomy Care	0.0	
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding	0.0	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	13.3	
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	0.0	With Pressure Sores	0.0	Have Advance Directives	13.3	
Total Number of Discharges		With Rashes	13.3	Medications		
(Including Deaths)	0			Receiving Psychoactive Drugs	53.3	

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities						

	This Facility	FDD Facilities		All Facilities		
	%	%	Ratio	%	Ratio	

Occupancy Rate: Average Daily Census/Licensed Beds	100.0	89.6	1.12	87.4	1.14	
Current Residents from In-County	93.3	33.5	2.78	76.7	1.22	
Admissions from In-County, Still Residing	0.0	11.3	0.00	19.6	0.00	
Admissions/Average Daily Census	0.0	21.3	0.00	141.3	0.00	
Discharges/Average Daily Census	0.0	25.0	0.00	142.5	0.00	
Discharges To Private Residence/Average Daily Census	0.0	11.4	0.00	61.6	0.00	
Residents Receiving Skilled Care	0.0	0.0	0.00	88.1	0.00	
Residents Aged 65 and Older	13.3	15.3	0.87	87.8	0.15	
Title 19 (Medicaid) Funded Residents	100.0	99.3	1.01	65.9	1.52	
Private Pay Funded Residents	0.0	0.5	0.00	21.0	0.00	
Developmentally Disabled Residents	100.0	99.4	1.01	6.5	15.40	
Mentally Ill Residents	0.0	0.3	0.00	33.6	0.00	
General Medical Service Residents	0.0	0.3	0.00	20.6	0.00	
Impaired ADL (Mean)*	37.3	53.1	0.70	49.4	0.76	
Psychological Problems	53.3	50.1	1.06	57.4	0.93	
Nursing Care Required (Mean)*	3.3	11.0	0.30	7.3	0.45	